



**Lake County**  
Health Department and  
Community Health Center

500 W. Winchester Road, Suite 102  
Libertyville, IL 60048  
Phone: 847-377-8020  
Fax: 847-984-5622

## APPLICATION FOR OWTS CONSTRUCTION PERMIT

P.I.N. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

A/P#: \_\_\_\_\_ Subdivision: \_\_\_\_\_ LOT: \_\_\_\_\_

Property Address: \_\_\_\_\_

Contractor/Applicant: \_\_\_\_\_

Contractor's Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

☐ APPROVED

☐ REJECTED

\_\_\_\_\_ REVISED DRAWING REQUIRED  
\_\_\_\_\_ REPLACE/REPAIR FENCE  
\_\_\_\_\_ CHANGE IN HOUSE LOCATION  
\_\_\_\_\_ PRIMARY/EXPANSION AREA DISTURBED  
\_\_\_\_\_ OTHER \_\_\_\_\_

BY: \_\_\_\_\_ DATE: \_\_\_\_\_